

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>				Attorney Docket No. 225660																																																		
				Client Reference No.																																																		
				First Inventor Dimitry G. Grabbe																																																		
				Title Tool and Method for Forming a Multi Fiber Ferrule																																																		
				Express Mail Label No. EV 336874692 US																																																		
APPLICATION ELEMENTS				ADDRESS TO:																																																		
				Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																																																		
1. <input checked="" type="checkbox"/> Utility Patent Application Transmittal Form 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification (including claims and abstract) [Total Pages 14] 4. <input checked="" type="checkbox"/> Drawings [Total Sheets 8] 5. <input checked="" type="checkbox"/> Combined Declaration and Power of Attorney [Total Pages 3] a. <input type="checkbox"/> Newly executed b. <input checked="" type="checkbox"/> Copy from prior application [Note Box 6 below] i. <input type="checkbox"/> <u>Deletion of Inventor(s)</u> Signed statement attached deleting inventor(s) named in the prior application 6. <input checked="" type="checkbox"/> Incorporation by Reference: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b is considered as part of the disclosure of the accompanying application and is hereby incorporated by reference. 7. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 8. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 9. Nucleotide and/or Amino Acid Sequence Submission a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper Copy c. <input type="checkbox"/> Statement verifying identity of above copies				ACCOMPANYING APPLICATION PARTS 10. <input type="checkbox"/> Applicant requests early publication. (include publication fee under 37 CFR 1.18(d)) 11. <input checked="" type="checkbox"/> Assignment Papers (cover sheet and document(s)) 12. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an Assignee) 13. <input checked="" type="checkbox"/> Power of Attorney 14. <input type="checkbox"/> English Translation Document (if applicable) 15. <input type="checkbox"/> Information Disclosure Statement (IDS) <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of Listed Documents 16. <input checked="" type="checkbox"/> Preliminary Amendment 17. <input checked="" type="checkbox"/> Return Receipt Postcard (Should be specifically itemized) 18. <input type="checkbox"/> Claim of Priority & Certified Copy of Priority Document(s) 19. <input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i) (Form PTO/SB/35 or its equivalent must be submitted with this application to prevent publication at 18 months) 20. <input type="checkbox"/>																																																		
21. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below: <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part of prior application no. 09/908,991. Prior application information: Examiner Michael C. Zarroli; Group Art Unit: 2839																																																						
APPLICATION FEES																																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="4" style="text-align: center;">BASIC FEE</td> <td style="text-align: right;">\$770.00</td> </tr> <tr> <td style="text-align: center;">CLAIMS</td> <td style="text-align: center;">NUMBER FILED</td> <td style="text-align: center;">NUMBER EXTRA</td> <td style="text-align: center;">RATE</td> <td></td> </tr> <tr> <td>Total Claims</td> <td style="text-align: center;">18 -20=</td> <td style="text-align: center;">0</td> <td style="text-align: center;">x \$18.00</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td>Independent Claims</td> <td style="text-align: center;">2 - 3=</td> <td style="text-align: center;">0</td> <td style="text-align: center;">x \$86.00</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td colspan="4"> <input type="checkbox"/> Multiple Dependent Claim if applicable </td> <td style="text-align: right;">+\$290.00 \$</td> </tr> <tr> <td colspan="4" style="text-align: right;">Total of above calculations =</td> <td style="text-align: right;">\$</td> </tr> <tr> <td colspan="4" style="text-align: right;">Reduction by 50% for filing by small entity =</td> <td style="text-align: right;">\$()</td> </tr> <tr> <td colspan="4"> <input checked="" type="checkbox"/> Assignment fee if applicable </td> <td style="text-align: right;">+ \$40.00 \$40.00</td> </tr> <tr> <td colspan="4"> <input type="checkbox"/> Early publication fee if applicable </td> <td style="text-align: right;">+ \$300.00 \$</td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL =</td> <td style="text-align: right;">\$810.00</td> </tr> </table>					BASIC FEE				\$770.00	CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE		Total Claims	18 -20=	0	x \$18.00	\$0.00	Independent Claims	2 - 3=	0	x \$86.00	\$0.00	<input type="checkbox"/> Multiple Dependent Claim if applicable				+\$290.00 \$	Total of above calculations =				\$	Reduction by 50% for filing by small entity =				\$()	<input checked="" type="checkbox"/> Assignment fee if applicable				+ \$40.00 \$40.00	<input type="checkbox"/> Early publication fee if applicable				+ \$300.00 \$	TOTAL =				\$810.00
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U.S. PTO
 10/755767




01/12/2004

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22. <input checked="" type="checkbox"/> Please charge my Deposit Account No. 12-1216 in the amount of \$810.00.	
23. <input type="checkbox"/> A check in the amount of \$ is enclosed.	
24. The Commissioner is hereby authorized to credit overpayments or charge any additional fees of the following types to Deposit Account No. 12-1216: a. <input checked="" type="checkbox"/> Fees required under 37 CFR 1.16. b. <input checked="" type="checkbox"/> Fees required under 37 CFR 1.17.	
25. <input checked="" type="checkbox"/> The Commissioner is hereby generally authorized under 37 CFR 1.136(a)(3) to treat any future reply in this or any related application filed pursuant to 37 CFR 1.53 requiring an extension of time as incorporating a request therefor, and the Commissioner is hereby specifically authorized to charge Deposit Account No. 12-1216 for any fee that may be due in connection with such a request for an extension of time.	
26. CORRESPONDENCE ADDRESS	
<input checked="" type="checkbox"/> Customer Number: 23460 23460	<input type="checkbox"/> , Reg. No. Leydig, Volt & Mayer, Ltd. Two Prudential Plaza, Suite 4900 180 North Stetson Avenue Chicago, Illinois 60601-6780 (312) 616-5600 (telephone) (312) 616-5700 (facsimile)
Name	John M. Augustyn, Registration No. 33,589
Signature	
Date	January 12, 2004

Certificate of Mailing Under 37 CFR 1.10		
I hereby certify that this Utility Patent Application Transmittal and all accompanying documents are being deposited with the United States Postal Service "Express Mail Post Office To Addressee" Service under 37 CFR 1.10 on the date indicated below and is addressed to: Mail Stop Patent Application, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.		
JUDITH M. BOBER		January 12, 2004
Name of Person Signing	Signature	Date

Utility Transmittal (Revised 10/1/03)